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CONFIRMATION NO. 3842

Bib Data Sheet

SERIAL NUMBER 10/736,266	FILING OR 371(c) DATE 12/15/2003 RULE	CLASS 128	GROUP ART UNIT 3771	ATTORNEY DOCKET NO. CHM-009
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**APPLICANTS**

Michael John Rutter, Cincinnati, OH;

**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/433,735 12/16/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

none

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

03/23/2004

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OH	SHEETS DRAWING 6	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 15
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

**ADDRESS**

38155

**TITLE**

Tracheotomy valve unit

FILING FEE RECEIVED 430	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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